

COPY OF PAPERS  
ORIGINALLY FILED

PATENT  
GEN-802

RECEIVED

MAY 16 2002

OFFICE OF PETITIONS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION: Rinaldi et al

Serial No. 09/754,663

Art Unit:

Filed: January 4, 2001

Examiner:

For: AUTOMATIC X-RAY DETECTION FOR INTRA-ORAL DENTAL X-RAY IMAGING APPARATUS

The Commissioner of Patents and Trademarks  
Washington, D.C. 20231

**BEST AVAILABLE COPY**

Petition to Revive Abandoned Application under 37 CFR 1.137(b)

The Applicant, through the undersigned attorney, hereby petitions the commissioner to revive the above-identified U.S. Patent Application under 37 CFR 1.137(b). A Notice of Abandonment has not been received but is anticipated to be for failure to submit Missing Parts within the allowed time.

Attached to this Petition is an Extension of Time and the response to the Notice to File Missing Parts of Nonprovisional Application dated April 27, 2001.

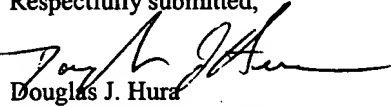
Please charge any additional fees due and credit any overpayment to Deposit Account No. 04-0780.

A Terminal Disclaimer and Fee as set forth in 37 CFR 1.321 dedicating to the public a terminal part of the term of any patent granted on this application equal to the period of abandonment of the application is also enclosed.

The entire delay in filing the required reply, namely Missing Parts, from the due date until the filing of this position was unintentional.

The Office is respectfully requested to accept Missing Parts in this case, and to pass the present application to prosecution. Should any further information be required, the undersigned attorney would welcome a telephone call.

Respectfully submitted,

  
Douglas J. Hura  
Attorney Reg. No. 33249

May 6, 2002

Address of the signer:

DENTSPLY International Inc.  
570 West College Avenue  
York, PA 17405-0872  
(717)848-4466

**STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8-26-02</u>		2 Serial/Patent # <u>09/754,663</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time		5-13-02	\$ 926							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
<b>BEST AVAILABLE COPY</b>		7 TOTAL AMOUNT OF REFUND		\$ 926							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
	Overpayment	Credit Deposit A/C #:									
	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>0</td><td>4</td><td>--</td><td>0</td><td>7</td><td>8</td><td>0</td></tr></table>			0	4	--	0	7	8	0
0	4	--	0	7	8	0					
	No Fee Due (Explanation):										
Fee not necessary											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Karen C. Casey</u>		TITLE: <u>Pet. Exam.</u>									
SIGNATURE: <u>Karen C. Casey</u>		PHONE: <u>305-8859</u>									
OFFICE: <u>LA Tech Center</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>Alison Kelly</u>		DATE: <u>8/28/02</u>									

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*